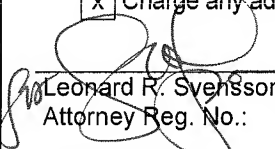


AMENDMENT TRANSMITTAL LETTER			Docket No. 0259-0411P		
Application No. 10/019,387-Conf. #6340	Filing Date March 26, 2003	Examiner D. L. Vanik	Art Unit 1615		
Applicant(s): Maurizio C. DALLE et al.					
USE OF HYALURONIC ACID DERIVATIVES FOR THE PREPARATION OF Invention: PHARMACEUTICAL COMPOSITIONS AND BIOMATERIALS FOR THE PREVENTION OF THE FORMATION AND CURE OF CUTANEOUS SCARS					
MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	30	- 29 =	1	x 50.00	50.00
Independent Claims	4	- 7 =	0	x 200.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month					120.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					170.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>02-2448</u> in the amount of \$ <u>170.00</u> . A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Leonard R. Svensson Attorney Reg. No.: 30,330			Dated: <u>October 1, 2007</u>		
BIRCH, STEWART, KOLASCH & BIRCH, LLP 12770 High Bluff Drive Suite 260 San Diego, California 92130 (858) 792-8855					

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<p><i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i></p> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2007</h3>		<p>Complete if Known</p>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/019,387-Conf. #6340
		Filing Date	March 26, 2003
		First Named Inventor	Maurizio C. DALLE
		Examiner Name	D. L. Vanik
		Art Unit	1615
TOTAL AMOUNT OF PAYMENT		(\$)	170.00
		Attorney Docket No.	0259-0411P

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION																					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																					
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)														
	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)															
Utility	300	150	500	250	200	100															
Design	200	100	100	50	130	65															
Plant	200	100	300	150	160	80															
Reissue	300	150	500	250	600	300															
Provisional	200	100	0	0	0	0															
2. EXCESS CLAIM FEES																					
Fee Description	Fee (\$)	<u>Small Entity</u> Fee (\$)																			
Each claim over 20 (including Reissues)	50	25																			
Each independent claim over 3 (including Reissues)	200	100																			
Multiple dependent claims	360	180																			
<table style="width: 100%;"> <tr> <td style="width: 30%;"><u>Total Claims</u></td> <td style="width: 10%;"><u>Extra Claims</u></td> <td style="width: 10%;"><u>Fee (\$)</u></td> <td style="width: 10%;"><u>Fee Paid (\$)</u></td> <td style="width: 30%;"><u>Multiple Dependent Claims</u></td> <td style="width: 10%;"><u>Fee (\$)</u></td> <td style="width: 10%;"><u>Fee Paid (\$)</u></td> </tr> <tr> <td>30</td> <td>- 29 = 1</td> <td>x 50.00</td> <td>= 50.00</td> <td></td> <td></td> <td></td> </tr> </table>								<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	30	- 29 = 1	x 50.00	= 50.00			
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>															
30	- 29 = 1	x 50.00	= 50.00																		
<p>HP = highest number of total claims paid for, if greater than 20.</p> <table style="width: 100%;"> <tr> <td style="width: 30%;"><u>Indep. Claims</u></td> <td style="width: 10%;"><u>Extra Claims</u></td> <td style="width: 10%;"><u>Fee (\$)</u></td> <td style="width: 10%;"><u>Fee Paid (\$)</u></td> <td colspan="3"></td> </tr> <tr> <td>4</td> <td>- 7 = 0</td> <td>x 200.00</td> <td>= 0.00</td> <td colspan="3"></td> </tr> </table> <p>HP = highest number of independent claims paid for, if greater than 3.</p>								<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				4	- 7 = 0	x 200.00	= 0.00			
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>																		
4	- 7 = 0	x 200.00	= 0.00																		
3. APPLICATION SIZE FEE																					
<p>If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).</p> <table style="width: 100%;"> <tr> <td style="width: 20%;"><u>Total Sheets</u></td> <td style="width: 10%;"><u>Extra Sheets</u></td> <td style="width: 20%;"><u>Number of each additional 50 or fraction thereof</u></td> <td style="width: 10%;"><u>Fee (\$)</u></td> <td style="width: 30%;"><u>Fee Paid (\$)</u></td> </tr> <tr> <td>_____</td> <td>- 100 = _____</td> <td>/50 _____ (round up to a whole number) x _____</td> <td>= _____</td> <td></td> </tr> </table>								<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	_____	- 100 = _____	/50 _____ (round up to a whole number) x _____	= _____					
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>																	
_____	- 100 = _____	/50 _____ (round up to a whole number) x _____	= _____																		
4. OTHER FEE(S)																					
Non-English Specification, \$130 fee (no small entity discount)							<u>Fees Paid (\$)</u>														
Other (e.g., late filing surcharge): <u>1251 Extension for response within first month</u>							<u>120.00</u>														

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	30,330
Name (Print Type)	Leonard R. Svensson	Telephone	(858) 792-8855
		Date	October 1, 2007